09/913,795

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

7060-3

						<u>_</u> _	Y / Y	ر_ ں	
CLAIMS AS FILED - PART I (Column 1) (Colu			(Column 2)		MALL EN	ITITY	OR	OTHER THAN R SMALL ENTITY	
TO	TAL CLAIMS	7.3			RATE	FEE		RATE	FEE
FOR		NUMBER FILED	NUMBER EXTRA		ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS		2 3 minus 20)= ' 3		X\$ 9=	27	OR	X\$18=	
INDEPENDENT CLAIMS		3 minus 3	= 0	」 「	X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT				J	+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2					TOTAL	382	OR	TOTAL	
ıβ	(Column 1) (Column 2) (Column 3)					ENTITY	OR	OTHER SMALL	
ENTA	CLAIMS REMAININ AFTER AMENDME	G N	IIGHEST IUMBER PRESENT EVIOUSLY EXTRA AID FOR		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total · 2	Minus ••	x3=3		X\$ 9≈	27	OR	X\$18=	
AME	FIRST PRESENTATION O	Minus	ENTEL AIM	7 L	X40=		OR	X80=	
	חר	ST AVAILA		-	+135=		OR	+270=	
//	1/1/13	31 WAYIFY	DE COLI	A	TOTAL DDIT. FEE	21	OR	TOTAL ADDIT. FEE	·
	(Column		olumn 2) (Column	3)		4.			•
ENT B	CLAIMS REMAININ AFTER AMENDME	G PR	HIGHEST NUMBER PRESENT EVIOUSLY EXTRA PAID FOR		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total 35	Minus ••	26 = 9	41	X\$ 9=	81	OR	X\$18=	
AME	Independent • 4	Minus	3 = /	1 9	/3 X40≤	13.	OR	X80=	
	FIRST PRESENTATION O	MOLTIPLE DEPENDI	EIAI CEXIM	┙┌	+135=	1	OR	+270=	
	12/1/2/			A	TOTAL ODIT. FEE	124	OR	TOTAL ADDIT. FEE	
	126/04 (Column	1) (C	olumn 2) (Column	3)					
ENT C	CLAIMS REMAININ AFTER AMENOME	G . N	HIGHEST HUMBER PRESENT EVIOUSLY EXTRA AID FOR	7 -	RATE	ADDI- TIONAL FEE	Ī	RATE	ADDI- TIONAL FEE
AMENDMENT	Total 35		35, = \	45	X\$ 9=)	Ø R)	X\$18=	
AME	FIRST PRESENTATION O	Minus	FNT CLAIM	41	X40=	X	OFI	X80=	
	FINST PRESENTATION U	MULTIFUE DEFEND	LIVI OLAHO /	┙┌	+135=		OR	+270=	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							_	TOTAL ADDIT. FEE	
•••	If the "Highest Number Previous The "Highest Number Previous!	ly Paid For" IN THIS SPA Paid For" (Total or Indep	CE is less than 3, enter "3 endent) is the highest nur		DOIT. FEE	propriate box			

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Application or Docket Number 09/93, 795 PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA FOR RATE FFF RATE FFF BASIC FEE (37 CFR 1 16(a)) OR TOTAL CLAIMS minus 20 = (37 CFR 1 16(c)) OR INDEPENDENT CLAIMS = (37 CFR 1 16(b)) minus 3 = = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(d)) OR TOTAL TOTAL OR * If the difference in column 1 is less than zero, enter "0" in column 2. ÇLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY (Column 1) SMALL ENTITY CLAIMS HIGHEST PRESENT RATE ADDI-REMAINING NUMBER RATE ADDI-**FXTRA** TIONAL TIONAL MENDMENT AFTER **PREVIOUSLY** AMENDMENT PAID FOR FEE FEE Minus Total (37 CFR 1.16(c)) OR Independent (37 CFR 1.16(b)) Minus OR x s FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ω PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**EXTRA** AFTER **PREVIOUSLY** TIONAL TIONAL AMENDMENT FFF AMENDMENT PAID FOR FEE Total Minus (37 CFR 1 16(c)) OR X \$ Minus Independent (37 CFR 1 16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT RATE ADDI-RATE ADDI-REMAINING MIMBER EXTRA TIONAL ENT PREVIOUSLY TIONAL AFTER AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus ENDM OR independent (37 CFR 1 16(b)) Minus OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR - If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

This collection of information is required by 37 CFR 1 16 The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office U S Department of Commerce, PO Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.